



17W1061ACB

070050.2535
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Modak *et al.* Examiner : Jagadishwar Rao - 1 28
Samala **RECEIVED**

Serial No. : 10/786,681 Confirmation No. : 3011 APR 03 2009
Filed : 02/25/2004 Group Art Unit : 1618 **OFFICE OF PETITIONS**
For : Gentle-Acting Skin-Disinfectants And Hydroalcoholic Gel Formulations

PETITION UNDER 37 C.F.R. § 1.28(c) AND CHANGE OF ENTITY STATUS

Mail Stop Petition

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

04/02/2009 DALLEN 00000009 024377 10786681

01 FC:1461 1070.00 DA

Sir:

Applicants hereby petition for the acceptance of a deficiency payment pursuant to 37.C.F.R. § 1.28(c) in the amount of \$1070.00.

Applicants have discovered that as of October 31, 2005 the above-identified patent application no longer qualified for small entity status and that they have erroneously paid, without deceptive intent, the following fees at the applicable small entity rates:

Type of Fee Erroneously Paid as small entity	Small Entity Fee Actually Paid	Date of Payment	Current Fee	Deficiency Amount Owed
Request for Continued Examination	\$405.00	03/23/2009	\$810.00	\$405.00
Request for Continued Examination	\$405.00	04/18/2008	\$810.00	\$405.00
Two Month Extension of Time	\$230.00	04/18/2008	\$490.00	\$260.00
Total Deficiency Owed				\$1070.00

Therefore, applicants request the amount of \$1070.00 be deducted from our Deposit Account No. 02-4377 for the deficiency payment as required by 37 C.F.R. § 1.28(c)(2).

Additionally, pursuant to C.F.R. § 1.27(g)(2), please change the status of the application from small entity to large entity.

Applicants believe no additional fee is due in connection with this petition. If any fee is due, or if any overpayment has been made, the Commissioner is authorized to charge any such fee or credit any overpayment, to our Deposit Account No. 02-4377.

Respectfully submitted,

BAKER BOTTS L.L.P.

March 24, 2009

Date



Sandra S. Lee
Patent Office Reg. No. 51,932

Lisa B. Kole
Patent Office Reg. No. 35,225

Baker Botts L.L.P.
30 Rockefeller Plaza
44th Floor
New York, NY 10012-4498
212-408-2500



TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/786,681	RECEIVED	
	Filing Date	02/25/2004		APR 03 2009
	First Named Inventor	Modak et al.	OFFICE OF PETITIONS	
	Art Unit	1618		
	Examiner Name	Jagadishwar Rao Samala		
Total Number of Pages in This Submission	Attorney Docket Number	070050.2535		

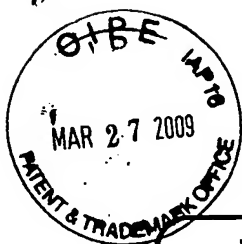
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Baker Botts L.L.P.		
Signature	<i>Sandra Lee</i>		
Printed name	Sandra S. Lee		
Date	03/24/2009	Reg. No.	51,932

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>David Schalk</i>		
Typed or printed name	David Schalk	Date	3/24/09

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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APR 03 2009

**FEE TRANSMITTAL
for FY 2007**

Complete if Known

OFFICE OF PETITIONS

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 1,070

Application Number	10/786,681
Filing Date	02/25/2004
First Named Inventor	Modak et al.
Examiner Name	Jagadishwar Rao Samala
Art Unit	1618
Attorney Docket No.	070050.2535

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit
Account
Number
Deposit
Account
Name

02-4377

Baker Botts L.L.P.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee
to the above-identified deposit account.**FEE CALCULATION****Extra Claim Fees**

	Extra Claims	Fee	Fee Paid
Total Claims		52	\$0
Independent Claims		220	\$0
Multiple Dependent			\$0

SUBTOTAL \$0

Fee Description	Large Entity	Small Entity
Claims in excess of 20	52	26
Independent claims in excess of 3	220	110
Multiple dependent claim, if not paid	390	195

FEE CALCULATION (continued)**ADDITIONAL FEES**

<input type="checkbox"/> Surcharge - late oath or filing fee	
<input type="checkbox"/> Non-English Specification	
<input type="checkbox"/> Extension for reply within first month	
<input type="checkbox"/> Extension for reply within second month	
<input type="checkbox"/> Extension for reply within third month	
<input type="checkbox"/> Extension for reply within fourth month	
<input type="checkbox"/> Extension for reply within fifth month	
<input type="checkbox"/> Notice of Appeal	
<input type="checkbox"/> Filing a brief in support of an appeal	
<input type="checkbox"/> Petition to revive - unavoidable	
<input type="checkbox"/> Petition to revive - unintentional	
<input type="checkbox"/> Utility Issue Fee	
<input type="checkbox"/> Design Issue Fee	
<input type="checkbox"/> Publication Fee	
<input type="checkbox"/> Petitions to the Commissioner	
<input type="checkbox"/> Request for Continued Examination (RCE)	
<input type="checkbox"/> Information Disclosure Statement (IDS)	

Other fee - Deficiency Payment

\$1,070

SUBTOTAL (\$ 1,070

SUBMITTED BY

Name (Print/Type)

Sandra S. Lee

Registration No.
(Attorney/Agent)

51,932

(Complete if applicable)

Telephone

212-408-2500

Signature

Sandra Lee

Date

03/24/2009

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.